

Docket No.: \_\_\_\_\_

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

### English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Title: Antenna arrangement in a mobile station

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as United States Application No. or PCT  
International Application Number  
and was amended on (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International Application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

#### **Prior Foreign Application(s)**

(Number)	(Country)	(Day/Month/Year Filed)	<b><u>Priority Not Claimed</u></b>
20002123	Finland	27 September 2000	<input type="checkbox"/>
			<input type="checkbox"/>
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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Application Serial No.:

\_\_\_\_\_  
(Filing Date)

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(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Status)  
(patented, pending, abandoned)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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All attorneys listed under Customer No.: 2512

Send Correspondence to:

Customer No.: 2512

Direct Telephone Calls to: (name and telephone number)

Clarence A. Green, Reg. No.: 24,622 (203) 259-1800

Full name of sole or first inventor:

KAIPONEN, Teemu

Sole or first inventor's signature:

*Teemu Kaiponen*

DATE

6.8.2001

Residence:

~~Alppitie 5 B 52, FIN-90530 OULU, Finland~~ 3863 Ingraham St E 309, San Diego, CA 92109

Citizenship:

Finland

Post Office Address:

~~Alppitie 5 B 52, FIN-90530 OULU, Finland~~

3863 Ingraham St E 309, SAN DIEGO, CA 92109, USA

TK 8/6/01

TK 8/6/01

Full name of second inventor:

KUITTINEN, Tero

Second inventor's signature:

DATE

Residence address:

Alppitie 10 as. 35, FIN-90350 OULU, Finland

Citizenship:

Finland

Post Office Address:

Alppitie 10 as. 35, FIN-90350 OULU, Finland

Full name of third inventor:

KYLMÄNEN, Jari

Third Inventor's signature:

DATE

Residence address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Citizenship:

Finland

Post Office Address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Full name of fourth inventor:

Fourth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

Full name of fifth inventor:

Fifth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

☐

Check here if additional pages are attached.

Number of added pages:

Page 4 Of 4

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Full name of sole or first inventor:

KAIPONEN, Teemu

Sole or first inventor's signature:

DATE

Residence:

Alppitie 5 B 52, FIN-90530 OULU, Finland

Citizenship:

Finland

Post Office Address:

Alppitie 5 B 52, FIN-90530 OULU, Finland

Full name of second inventor:

KUITTINEN, Tero

Second inventor's signature:

DATE

*Tero Kuitinen*

3.8.01

Residence address:

~~Alppitie 10 as. 35, FIN-90350 OULU, Finland~~

SIRVELINEN 10A2, FIN-90800

Citizenship:

Finland

Post Office Address:

~~Alppitie 10 as. 35, FIN-90350 OULU, Finland~~

SIRVELINEN 10A2, FIN-90800

*Tero*  
3.8.01

*Tero*  
3.8.01

1.01.2020 14:44:44

Full name of third inventor:

KYLMÄNEN, Jari

Third Inventor's signature:

DATE

Residence address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Citizenship:

Finland

Post Office Address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Full name of fourth inventor:

Fourth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

Full name of fifth inventor:

Fifth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

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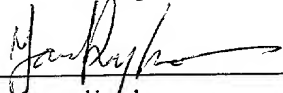
Full name of sole or first inventor: <b>KAIPONEN, Teemu</b>	
Sole or first inventor's signature:	DATE
Residence: <b>Alppitie 5 B 52, FIN-90530 OULU, Finland</b>	
Citizenship: <b>Finland</b>	
Post Office Address: <b>Alppitie 5 B 52, FIN-90530 OULU, Finland</b>	

Full name of second inventor: <b>KUITTINEN, Tero</b>	
Second inventor's signature:	DATE
Residence address: <b>Alppitie 10 as. 35, FIN-90350 OULU, Finland</b>	
Citizenship: <b>Finland</b>	
Post Office Address: <b>Alppitie 10 as. 35, FIN-90350 OULU, Finland</b>	

Full name of third inventor:

KYLMÄNEN, Jari

Third Inventor's signature:



DATE

010801

Residence address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Citizenship:

Finland

Post Office Address:

Kesätie 1 B 15, FIN-90530 OULU, Finland

Full name of fourth inventor:

Fourth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

Full name of fifth inventor:

Fifth inventor's signature:

DATE

Residence address:

Citizenship:

Post Office Address:

☐

Check here if additional pages are attached. Number of added pages:

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